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LAVA GROUP FILE #: 05001.1270

SUBJECT : Power of Attorney/ Change of Address

This Transmission Includes the Following Items

Item being transmitted	Pages
<input checked="" type="checkbox"/> Transmittal Form	1
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<input checked="" type="checkbox"/> Statement Under 37 CFR and Supporting Documents	3
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Total Pages Including Cover Sheet 6

COMMENTS:

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PTO/SB/21 (08-03)

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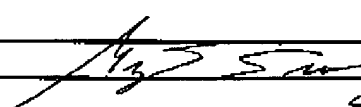
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/035,172	
	Filing Date	January 4, 2002	
	First Named Inventor	HUNTER, et al.	
	Art Unit	2153	
	Examiner Name		
Total Number of Pages in This Submission	5	Attorney Docket Number	05001,1270

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please Identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	LAVA Group Law by Smith and Frohwein, LLC.
Signature	
Date	5/7/04

CERTIFICATE OF TRANSMISSION/MAILING

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